

CONFIDENTIAL PERSONAL REFERENCE FOR NURSING PROGRAM

Note to the Referee:

This reference will be reviewed, in conjunction with the applicant's general university application, by the Nursing Selection Committee for admission to the nursing program. If you have completed a general university reference for the applicant, please complete this form independent of the comments made in that reference.

Note to the Applicant:

Enter your name and address on the appropriate lines and give this form to your referee (excluding close relatives). Please provide a stamped envelope to the reference.

Please return this completed form to:

Trinity Western University
Undergraduate Admissions
7600 Glover Road
Langley, BC
V2Y 1Y1

Or, in the United States: Trinity Western University
Undergraduate Admissions
P.O. Box 1409
Blaine, WA
98231 1409

APPLICANT (please print clearly)

Mr. Mrs. Miss Ms. _____

[last name, first name, middle name(s)]

Street: _____

City: _____

Province/State: _____

Country: _____ Postal/Zip: _____

REFEREE (please print clearly)

Rev. Dr. Mr. Mrs. Miss Ms. _____

[last name, first name, middle name(s)]

Position: _____

Church/Company: _____

Street: _____

City: _____ Province/State: _____

Country: _____ Postal/Zip: _____

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1. How long have you known the applicant? _____

2. In what context/relationship? _____

3. How well do you know the applicant? Very well Well Casually

4. Comment on the applicant's suitability for nursing: _____

5. Comment on the applicant's ability to accommodate change and handle stress: _____

6. Comment on the applicant's maturity and emotional stability: _____

7. Comment on the applicant's interpersonal skills and fluency in English: _____

Date: _____

Signature: _____